

County: Winnebago
 OMRO CARE CENTER
 500 SOUTH GRANT STREET
 OMRO 54963 Phone: (920) 685-2755
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/00): 91
 Total Licensed Bed Capacity (12/31/00): 119
 Number of Residents on 12/31/00: 80

Facility ID: 6640

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Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF?
 Title 18 (Medicare) Certified?
 Average Daily Census:

Corporation
 Skilled
 No
 Yes
 83

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	38.8
Supp. Home Care-Personal Care	No					1 - 4 Years	43.8
Supp. Home Care-Household Services	No	Developmental Disabilities	1.3	Under 65	1.3	More Than 4 Years	17.5
Day Services	No	Mental Illness (Org./Psy)	18.8	65 - 74	12.5		
Respite Care	No	Mental Illness (Other)	8.8	75 - 84	32.5		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	40.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.8	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	6.3		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	18.8	65 & Over	98.8		
Transportation	No	Cerebrovascular	7.5			RNs	8.9
Referral Service	No	Diabetes	3.8	Sex	%	LPNs	8.1
Other Services	Yes	Respiratory	5.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	30.0	Male	30.0	Aides & Orderlies	
Mentally Ill	No			Female	70.0		29.9
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Total No.	Percent Of All Residents
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	8	100.0	\$290.19	48	87.3	\$92.86	1	100.0	\$118.00	16	100.0	\$130.00	0	0.0	\$0.00	73	91.3%
Intermediate	---	---	---	7	12.7	\$76.93	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	7	8.8%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	8	100.0		55	100.0		1	100.0		16	100.0		0	0.0		80	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from						
Private Home/No Home Health	8.5	Bathing	0.0	88.8	11.3	80
Private Home/With Home Health	1.7	Dressing	8.8	82.5	8.8	80
Other Nursing Homes	5.1	Transferring	31.3	57.5	11.3	80
Acute Care Hospitals	82.1	Toilet Use	16.3	65.0	18.8	80
Psych. Hosp. -MR/DD Facilities	0.0	Eating	53.8	43.8	2.5	80
Rehabilitation Hospitals	0.0	*****				
Other Locations	2.6	Continence				
Total Number of Admissions	117	Indwelling Or External Catheter	7.5	Special Treatments		
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	65.0	Receiving Respiratory Care		10.0
Private Home/No Home Health	19.8	Occ/Freq. Incontinent of Bowel	28.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	4.1			Receiving Suctioning		1.3
Other Nursing Homes	4.1			Receiving Ostomy Care		1.3
Acute Care Hospitals	41.3	Mobility		Receiving Tube Feeding		1.3
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	8.8	Receiving Mechanically Altered Diets		45.0
Rehabilitation Hospitals	0.0					
Other Locations	4.1	Skin Care		Other Resident Characteristics		
Deaths	26.4	With Pressure Sores	3.8	Have Advance Directives		76.3
Total Number of Discharges		With Rashes	2.5	Medications		
(Including Deaths)	121			Receiving Psychoactive Drugs		37.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:		Bed Size:		Licensure:		All	
	This Facility	Peer Group	100-199	Peer Group	Skilled	Peer Group	Facilities	Ratio
	%	%	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	69.7	82.5	0.85	83.6	0.83	84.1	0.83	84.5
Current Residents from In-County	93.8	83.3	1.13	86.1	1.09	83.5	1.12	77.5
Admissions from In-County, Still Residing	22.2	19.9	1.12	22.5	0.99	22.9	0.97	21.5
Admissions/Average Daily Census	141.0	170.1	0.83	144.6	0.98	134.3	1.05	124.3
Discharges/Average Daily Census	145.8	170.7	0.85	146.1	1.00	135.6	1.07	126.1
Discharges To Private Residence/Average Daily Census	34.9	70.8	0.49	56.1	0.62	53.6	0.65	49.9
Residents Receiving Skilled Care	91.3	91.2	1.00	91.5	1.00	90.1	1.01	83.3
Residents Aged 65 and Older	98.8	93.7	1.05	92.9	1.06	92.7	1.07	87.7
Title 19 (Medicaid) Funded Residents	68.8	62.6	1.10	63.9	1.08	63.5	1.08	69.0
Private Pay Funded Residents	20.0	24.4	0.82	24.5	0.82	27.0	0.74	22.6
Developmentally Disabled Residents	1.3	0.8	1.62	0.8	1.52	1.3	1.00	7.6
Mentally Ill Residents	27.5	30.6	0.90	36.0	0.76	37.3	0.74	33.3
General Medical Service Residents	30.0	19.9	1.51	21.1	1.42	19.2	1.56	18.4
Impaired ADL (Mean)	44.5	48.6	0.92	50.5	0.88	49.7	0.90	49.4
Psychological Problems	37.5	47.2	0.80	49.4	0.76	50.7	0.74	50.1
Nursing Care Required (Mean)	8.1	6.2	1.32	6.2	1.31	6.4	1.26	7.2